

MAIL TO:
Office of the Attorney General
Registry of Charitable Trusts
P.O. Box 903447
Sacramento, CA 94203-4470

STREET ADDRESS:
1300 I Street, Room 1130
Sacramento, CA 95814
Telephone: (916) 323-5079

WEBSITE ADDRESS:
<http://caag.state.ca.us/charities/>

COMMERCIAL FUNDRAISER FOR CHARITABLE PURPOSES

2002 ANNUAL FINANCIAL REPORT (California Government Code Section 12599)

Failure to file annual financial report by January 30 annually for each calendar year of solicitation may result in fines or penalties as defined in Government Code Section 12596.1 (Recently enacted).

An annual financial report must be filed for each event for each charity solicited for during the previous calendar year.



Name and Address of Commercial Fundraiser:

CF Number CF-357
Lexy, Parenti & Assoc. N/A
Name of Commercial Fundraiser
911 W. Pico Blvd., #1530
Address of Commercial Fundraiser
Los Angeles, CA 90035
City, State, and ZIP Code of Commercial Fundraiser

DREAM HALLOWEEN held (on) (from) OCTOBER 26, 2002 to OCTOBER 26, 2002
(Type of Activity) (Date or dates must be shown)

1. REVENUE

- A. Cash contributions
B. Entertainment sales or admission charges
C. Sales from products
D. Advertisement sales
E. Membership fees (SPONSORSHIPS)
F. Other sources: (Specify)
a. AUCTION
b. DRAWING
c.
d.

G. TOTAL REVENUE

2. EXPENSES

- A. Fees or commissions (PROG. COORD.)
B. Salaries
C. Payroll taxes
D. Employee benefits
E. Cost of merchandise for resale (FOOD)
F. Cost of entertainment
G. Postage PRINTING
H. Advertising P.R.
I. Telephone
J. Rental of equipment
K. Facilities charge
L. Permits SECURITY/PARKING
M. Other expenses: (Specify)
a. PRODS
b. RESERVATIONS CHARGES
c. MISCELLANEOUS
d. SOUND/LIGHTING

N. TOTAL EXPENSES

3. Distribution or net to charitable organization or charitable purposes

4. (a) Is any officer, director, partner or owner of the Commercial Fundraiser in any way affiliated with or control, directly or indirectly, the charitable organization for which the Commercial Fundraiser has contracted to solicit?

[] Yes [X] No If "yes," complete the following:

Name of officer, director, partner or owner of Commercial Fundraiser	Name and address of charitable organization	Relationship of officer, etc. To charitable organization

(b) For each affiliation identified in 4(a), attach copy of the contract between the commercial fundraiser and the charity.

Under penalties of perjury, I declare that I have examined this report, including accompanying documents, schedules and statements, and to the best of my knowledge

Signature of authorized officer (Commercial Fundraiser) JUDY LOM Printed Name Owner Title 1/31/03 Date

of the charitable organization for verifying the distribution.

CATHERINE BROWN Printed Name EXECUTIVE DIRECTOR Title 1/2/03 Date

JOE CRISTINA Printed Name BOARD CHAIR Title 1/8/03 Date

400688

\$832,570- G.

\$263,751- N.
\$568,819- 3.